

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. **R0145B-REG**First Inventor **David Michael Goldstein**Title **6-Alkoxy-Pyrido-Pyrimidines**Express Mail Label No. **EH 814 667 825 US**

22241 U.S.P.T.O. 10/6/2003

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)

2.  Applicant claims small entity status.  
See 37 CFR 1.27.

3.  Specification [Total Pages **50**]  
(preferred arrangement set forth below)  
- Descriptive title of the Invention  
- Cross Reference to Related Applications  
- Statement Regarding Fed sponsored R & D  
- Reference to sequence listing, a table, or a computer program listing appendix  
- Background of the Invention  
- Brief Summary of the Invention  
- Brief Description of the Drawings (if filed)  
- Detailed Description  
- Claim(s)  
- Abstract of the Disclosure

4.  Drawing(s) (35 U.S.C.113) [Total Sheets ]

5. Oath or Declaration [Total Pages **2**]  
a.  Newly executed (copy)  
b.  Copy from a prior application (37 CFR 1.63 (d))  
(for a continuation/divisional with Box 18 completed)  
i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR  
1.63(d)(2) and 1.33(b).

6.  Application Data Sheet. See 37 CFR 1.76

**ADDRESS TO:**Commissioner for Patents  
Mail Stop: Patent Application, P.O. Box 1450  
Alexandria, VA 22313-1450

7.  CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  
a.  Computer Readable Form (CRF)  
b. Specification Sequence Listing on:  
i.  CD-ROM or CD-R (2 copies); or  
ii.  paper  
c.  Statements verifying identity of above copies

**ACCOMPANYING APPLICATIONS PARTS**

9.  Assignment Papers (cover sheet & document(s))

10.  37 C.F.R. §3.73(b) Statement  Power of Attorney (when there is an assignee)

11.  English Translation Document (if applicable)

12.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations

13.  Preliminary Amendment

14.  Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)

15.  Certified Copy of Priority Document(s) (if foreign priority is claimed)

16.  Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.

17.  Other: \_\_\_\_\_

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation     Divisional     Continuation-in-part (CIP)

of prior application No: \_\_\_\_\_ / \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_

Group / Art Unit: \_\_\_\_\_

**● Claim for Benefit of Provisional Application(s):**

This application claims the benefit under Title 35 U.S.C. 119(e) of U.S. Provisional Application No. 60/401,491, filed August 6, 2002.

**17. CORRESPONDENCE ADDRESS**

Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or  Correspondence address below

Name	ROCHE PALO ALTO LLC				
	Patent Law Dept. M/S A2-250				
Address	3431 Hillview Avenue				
City	Palo Alto	State	CA	Zip Code	94304
Country	USA	Telephone	650/354-7540		Fax 650/855-5322

Name (Print/Type)	Robert C. Hall	Registration No. (Attorney/Agent)	39,209
Signature			Date August 5, 2003

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 750.00)

Complete if Known	
Application Number	New Application
Filing Date	within
First Named Inventor	David Michael Goldstein
Examiner Name	unassigned
Group / Art Unit	unassigned
Attorney Docket No.	R0145B-REG

METHOD OF PAYMENT (check one)				FEE CALCULATION (continued)																																																																																																																																																														
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees, to charge any additional fees that may be required, or to credit any overpayments to:</p> <p>Deposit Account Number <input type="text"/></p> <p>Deposit Account Name <input type="text"/> Roche Palo Alto LLC 3431 Hillview Avenue Palo Alto, CA 94304</p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>				<p>3. 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\*\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY						Complete (if applicable)	
Name (Print/Type)	Robert C. Hall	Registration No. Attorney/Agent)	39,209	Telephone	354-7540		
Signature				Date	August 5, 2003		